

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/428,322	10/28/99	348	2711	RCA-89541

APPLICANT MARY LAFUZE COMER, FAIRMOUNT, IN; THOMAS EDWARD HORLANDER, INDIANAPOLIS, IN.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED PROVISIONAL APPLICATION NO. 60/133,429 05/11/99

JB

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

None JB

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

None JB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/29/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>JB</u> Examiner's Initials <u>JB</u> Initials	IN	5	23	3

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PATENT OPERATIONS  
THOMSON MULTIMEDIA LICENSING INC  
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PRINCETON NJ 08543-5312

TITLE APPARATUS AND METHOD FOR DERIVING AN ENHANCED DECODED  
REDUCED-RESOLUTION VIDEO SIGNAL FROM A CODED HIGH-DEFINITION VIDEO  
SIGNAL

FILING FEE  
RECEIVED

\$814

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
NO. \_\_\_\_\_ for the following:

- ☐ All Fees  
☐ 1.16 Fees (Filing)  
☐ 1.17 Fees (Processing Ext. of time)  
☐ 1.18 Fees (Issue)  
☐ Other \_\_\_\_\_  
☐ Credit



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Bib Data Sheet

CONFIRMATION NO. 4518

SERIAL NUMBER 09/428,322	FILING DATE 10/28/1999  RULE	CLASS 375	GROUP ART UNIT 2636	ATTORNEY DOCKET NO. RCA-89541
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APPLICANTS

MARY LAFUZE COMER, FAIRMOUNT, IN;  
 THOMAS EDWARD HORLANDER, INDIANAPOLIS, IN;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/133,429 05/11/1999

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 11/29/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 5	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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TITLE  
 APPARATUS AND METHOD FOR DERIVING AN ENHANCED DECODED REDUCED-RESOLUTION VIDEO SIGNAL FROM A CODED HIGH-DEFINITION VIDEO SIGNAL

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )